

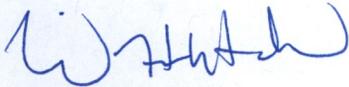
CITY OF
ASHLAND

June 12, 2018

Alfred Willstatter
128 Central Ave.
Ashland OR 97520

A prospective petition has been completed and filed with the City Recorder's Office for City Councilor Position #3

Petition ID CC2018-03A has been approved for circulation to obtain the required 25 signatures for this position. Deadline to submit petitions to the Election Officer is August 16, 2018.



Melissa Huhtala
City Recorder



Candidate Filing
Major Political Party or Nonpartisan

RECEIVED JUN 12 2018
withheld

SEL 101
rev 01/18
ORS 249.031

Filing Dates		Candidate Filing	State Voters' Pamphlet	Candidate Withdrawal
Primary Election May 15, 2018	First Day to File Last Day to File	September 7, 2017 March 06, 2018	January 15, 2018 March 8, 2018	March 9, 2018
General Election November 6, 2018	First Day to File Last Day to File	May 30, 2018 August 28, 2018	July 9, 2018 August 28, 2018	August 31, 2018

Filing Information

This filing is an Original Amendment

Filing Officer Secretary of State County Elections Official City Recorder (Auditor)

Office Information

Filing for Office of: *CITY COUNCILOR POS #3*

District, Position or County: *CITY OF ASHLAND*

Party Affiliation: Democratic Party Republican Party Independent Party Nonpartisan

Incumbent Judge (for judicial candidates only): Yes No Nondisclosure on file

Filing Method

Fee

Office	Filing Fee	Office	Filing Fee
United States President	n/a	District Attorney	\$50
United States Vice President	n/a	County Judge	\$50
United States Senator	\$150	MSD Executive Officer, MAD Director	\$100
United States Representative	\$100	MSD Councilor	\$25
Statewide Offices	\$100	County Office	\$50
State senator or Representative	\$25	City Office	Set by charter or ordinance
Circuit Court Judge	\$50	Justice of the Peace	n/a

Prospective Petition, in lieu of filing fee Some circulators may be paid Yes No

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
<i>ALFRED WILLSTATTER</i>				

How you would like your name to appear on the ballot

AL WILLSTATTER

Candidate Residence / Route Address

Street Address	City	State	Zip	County
<i>128 CENTRAL AVE</i>	<i>ASHLAND</i>	<i>OR</i>	<i>97520</i>	<i>JACKSON</i>

Candidate Mailing Address and Contact Information Only one phone number is required.

Street Address or PO Box	City	State	Zip
<i>SAME</i>			
Work Phone	Home Phone	Cell Phone	Fax
<i>/</i>	<i>541 482 2867</i>	<i>/</i>	<i>/</i>
Email Address	Web Site, if applicable		
<i>/</i>			

Occupation (present employment) If no relevant experience, None or NA must be entered.

RETIRED

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.

US MILITARY WWII / KOREA US DEPT OF STATE AUSTRIA / NETHERLAND

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
N/A			

Educational Background (other) Attach a separate sheet if necessary.

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

ASHLAND CITY COUNCIL 1969-1972 ORIGINAL CHAIRMAN & FOUNDING MEMBER RVD BOARD OF DIRECTORS 1974-1999

Campaign Finance Information Not applicable to candidates for federal office.

Candidate Committee This section should not be amended at a later date.

- Yes, I have a candidate committee.
- No, I do not expect to spend or receive more than \$750 during each calendar year. The \$750 includes personal funds spent for any campaign-related costs, such as the candidate filing fee; however state voters' pamphlet filing fees are not included when calculating contribution or expenditure totals. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$750 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.
- NOTE: If you have previously filed for office please check with the Elections Division to verify if you have an existing candidate committee.**
- No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

Candidate Attestation

By signing this document, I hereby state that:

- I will accept the nomination for the office indicated above;
- I will qualify for said office if elected;
- All information provided by me on this form is true to the best of my knowledge; **and**
- No circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition

For Major Political Party Candidates

- if not nominated, I will not accept the nomination or endorsement of any political party other than the one named
- I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.

Warning
 Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,000 and/or prison for up to 5 years. (ORS 260.715). A person may only file for one lucrative office or not more than one precinct committee person at the same election. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)

Alfred Willsteth

Candidate Signature

6/11/18

Date

For Office User Only

Initials _____

Batch Sheet/CC Approval Code/ Receipt Number _____

VOLUNTARY CONTRIBUTION & SPENDING LIMITS FOR CANDIDATES FOR CITY OFFICES AMC 2.41

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

<input checked="" type="radio"/> Candidate	<input type="radio"/> Political Committee	Primary 20__ General 20 <u>18</u> Other Election Date
Candidate or Political Committee Name <u>NONE ANTICIPATED</u>		Committee Identification Number
Treasurer's Full Name		Telephone Number (day)
Address (street or route, city, state, zip code)		
Office of Filing <u>COUNCIL POSITION CITY OF ASHTLEN # 3</u>		
<p>I certify that if I am signing as a candidate, I will not make attributable expenditures for this election in excess of \$3,869.00 (including expenditures of my principal campaign committee), or, if I am signing as a treasurer of a political committee organized exclusively to support or to oppose a candidate, I certify that the committee will not make attributable expenditures in this election in excess of \$3,869.00.</p>		
Candidate or treasurer's signature <u>Alfred Willstatter</u>		Date Signed <u>6/12/18</u>
<p>[NOTE: If the candidate or committee treasurer elects NOT to be bound by the expenditure limitations, the following line should be signed instead of the line above.]</p> <p>I elect not to be limited to the attributable expenditures specified in this certificate and city ordinance.</p>		
Candidate or treasurer's signature		Date Signed
<p>The City Recorder is authorized to publish a statement in the City, indicating whether or not the candidate has agreed to limit expenditures.</p> <p>If the City Recorder or the City Attorney finds that a candidate filing a declaration of limitation on expenditures has exceeded the applicable expenditure limit, at the next election at which the candidate is a candidate for election to public office, the City Recorder shall publish a statement, in the City, indicating that the candidate violated a previous declaration of limitation.</p>		<p>RECEIVED JUN 12 2018</p> <p><i>W. H. H.</i></p>

Candidate Signature Sheet | Nonpartisan

Petition ID CC2018-03A

Signatures for this petition are being gathered by PAID Circulators VOLUNTEER Circulators

This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County JACKSON

Candidate Information	
Name <u>AL WILLSTATTER</u>	Office <u>CITY COUNCILOR</u>
Election <u>GENERAL ELECTION</u>	District or Position Number <u>POS #3</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
<u>Al Willstatter</u>		<u>AL WILLSTATTER</u>	<u>128 CENTRAL AVE #2 97520</u>

Circulator Certification This certification **must** be completed by the circulator and additional signatures **should not** be collected on this sheet once the certification has been signed and dated!

I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

Circulator Signature	Date Signed mm/dd/yy	Sheet Number
		Sheet will be numbered by group submitting the petition.

Printed Name of Circulator	Circulator's Address street, city, zip code

SEL 121 rev 01/14 ORS 249.072 County Elections Officials provide a separate certification to attach to the petition.

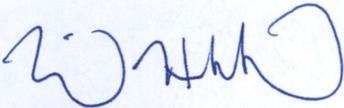
CITY OF
ASHLAND

August 8, 2018

Alfred Willstatter
128 Central Ave.
Ashland OR 97520

A completed petition, with the required signature sheets properly certified by the county elections office has been received and is filed with the City Recorder's Office for the City Council Position #3.

Please let me know if I can be of any further assistance during this upcoming election time.



Melissa Huhtala
City Recorder



Petition Submission
Candidate, Voters' Pamphlet

RECEIVED JUL 31 2018

SEL 338

rev. 01/18
 OAR 165-010-0005, 165-016-0000

→ This form must be completed and filed with any submission of signatures.

Filing Officer

State County For both county and district petitions. City

Election Type

Primary General Special Election 2018 2019 2020

Petition Information

Number CE 2018-CTBA **Type** Candidate Nominating
 Voters' Pamphlet, Candidate Voters' Pamphlet, Measure

Type of Filing

Candidate Nominating

Number of Signatures Submitted

35

Voters' Pamphlet, Candidate

Voters' Pamphlet, Measure

Candidate

→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name ALFRED WILSCATT	Contact Phone 541 482 2807	Email Address _____
Signature <i>Alfred Wilscatt</i>	Date Signed 7-31-18	

Measure Argument Filer

→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name	Contact Phone	Email Address
Signature	Date Signed	

For office use only

Submittal number	Number of signatures accepted
Is the petition complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will there be additional submittals? <input type="checkbox"/> Yes <input type="checkbox"/> No

County: JACKSON
User Name : Myers, Trisha

Petition Processing Statistics Report

Date : 8/3/2018 2:07:17 PM

Number :CC2018-03A Title :Ashland City Council, Position 3-AI Willstatter

Petition Information

Petition Name : Ashland City Council, Position 3-AI Willstatter

Petition Date : 07/01/2018

Date Filed : 07/01/2018

End Circulation Date : 07/31/2018

Minimum Signatures Required : 25

Accepted Of Minimum : (112.00%)

Total Signatures Processed : 31

Processing Summary Sample: All

Total Accepted Signatures : 28 (90%) **Of Those Processed**

Total Rejected Signatures : 3 (10%) **Of Those Processed**

Accepted Reason	Total	(% Rejected)
-----------------	-------	--------------

Valid Signature	28	(100%)
-----------------	----	--------

Rejected Reason	Total	(% Rejected)
-----------------	-------	--------------

Not Registered	1	(33.3%)
----------------	---	---------

Out of District	1	(33.3%)
-----------------	---	---------

Signatures Do Not Match	1	(33.3%)
-------------------------	---	---------

Candidate Signature Sheet | Nonpartisan

Petition ID CC2018-03A

Signatures for this petition are being gathered by PAID Circulators **SELF** VOLUNTEER Circulators

This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County JACKSON

Candidate Information	
Name <u>AL WILLSTATTER</u>	Office <u>CITY COUNCILOR</u>
Election <u>GENERAL ELECTION</u>	District or Position Number <u>POS #3</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

	Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
1	<u>Al Willstatter</u>	<u>7-1</u>	<u>AL WILLSTATTER</u>	<u>128 CENTRAL ASHLAND 97520</u>
2	<u>Betty LaDuke Westgard</u>	<u>7-1</u>	<u>BETTY LADUKE WESTGARD</u>	<u>610 Longway Oakland OR 97520</u>
3	<u>Gail K. Johnson</u>	<u>7-2</u>	<u>GAIL K. JOHNSON</u>	<u>611 Longway Ashland 97520</u>
4	<u>Thomas L. Koland</u>	<u>7-2</u>	<u>TOM KOLAND</u>	<u>439 Lit Way, OR 97520</u>
5	<u>Barry A Baker</u>	<u>7-3</u>	<u>BARRY BAKER</u>	<u>122 Helman St. Ashland 97520</u>
6	<u>Michelle A Baker</u>	<u>7-3</u>	<u>Michelle Baker</u>	<u>122 Helman St Ashland 97520</u>
7	<u>Joseph A Travieso</u>	<u>7-5</u>	<u>Joseph A Travieso</u>	<u>155 Central Ave Ashland 97520</u>
8	<u>Joseph H Peter</u>	<u>7-5</u>	<u>JOE PETERSON</u>	<u>294 Village Park Ashland 97520</u>
9	<u>Joan D Drager</u>	<u>7-6</u>	<u>JOAN D. DRAGER</u>	<u>123 CENTRAL AVE, ASHLAND, OR 97520</u>
10	<u>Marilyn Briggs</u>	<u>7-6</u>	<u>MARILYN BRIGGS</u>	<u>590 GLENVIEW DRIVE, ASHLAND 97520</u>

Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet once the certification has been signed and dated!

I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

Alfred Willstatter 7-7-18
Circulator Signature Date Signed mm/dd/yy

ALFRED WILLSTATTER ALFRED WILLSTATTER
Printed Name of Circulator Circulator's Address street, city, zip code

Sheet Number
Sheet will be numbered by group submitting the petition.

Candidate Signature Sheet | Nonpartisan

Signatures for this petition are being gathered by PAID Circulators **SELF** VOLUNTEER Circulators

Petition ID CC2018-03A

This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County JACKSON

Candidate Information	
Name <u>AL WILLSTATTER</u>	Office <u>CITY COUNCILOR</u>
Election <u>GENERAL ELECTION</u>	District or Position Number <u>POS # 3</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
<u>James Pizon</u>	<u>6/30/2018</u>	<u>JAMES C PIZON</u>	<u>251 OTIS STREET, ASHLAND OR 97520</u>
<u>Kathleen N. Pizon</u>	<u>6/30/2018</u>	<u>Kathleen N. Pizon</u>	<u>251 Otis St., Ashland OR 97520</u>
<u>Victoria Giffin</u>	<u>6/30/2018</u>	<u>Victoria Giffin</u>	<u>269 Otis St. Ashland OR 97520</u>
<u>Peter D. Giffin</u>	<u>6-30-2018</u>	<u>Peter D. Giffin</u>	<u>269 Otis St Ashland 97520</u>
<u>Suzan C. Towlen</u>	<u>7/2/18</u>	<u>Suzan C. Towlen</u>	<u>300 Starflower Ln Ashland 97520</u>
<u>Dennis Robertson</u>	<u>7-2-18</u>	<u>Dennis Robertson</u>	<u>531 N Laurel, Ashland "</u>
<u>David L. McKee</u>	<u>7/2/18</u>	<u>David L. McKee</u>	<u>145 Sherman St Ashland OR 97520</u>
<u>Kenneth Kigel</u>	<u>7/3/18</u>	<u>Kenneth Kigel</u>	<u>270 Scenic Dr. Ashland 97520</u>
<u>Andy Baxter</u>	<u>7/3/18</u>	<u>ANDY BAXTER</u>	<u>255 HELMAN SI ASHLAND 97520</u>
<u>Ann Strauss</u>	<u>7/5/18</u>	<u>Ann Strauss</u>	<u>650 Holly " "</u>

Circulator Certification This certification **must** be completed by the circulator and additional signatures **should not** be collected on this sheet once the certification has been signed and dated!

I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

<u>Al Willstatter</u>	<u>7-5-18</u>	<u>2</u>
Circulator Signature	Date Signed mm/dd/yy	Sheet Number
<u>AL WILLSTATTER</u>	<u>128 CENTRAL AVE ASHLAND OR 97520</u>	Sheet will be numbered by group submitting the petition.
Printed Name of Circulator	Circulator's Address street, city, zip code	

Candidate Signature Sheet | Nonpartisan

Petition ID CC 2018-03A

Signatures for this petition are being gathered by PAID Circulators SELF VOLUNTEER Circulators

This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County JACKSON

Candidate Information	
Name <u>AL WILLSTATTER</u>	Office <u>CITY COUNCILOR</u>
Election <u>GENERAL</u>	District or Position Number <u>3</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
<u>Robert Bruce Duncan</u>	<u>7-3-2018</u>	<u>ROBERT BRUCE DUNCAN</u>	<u>1109 Village Squares Dr Ashland 97520</u>
<u>Trucilla R. Duncan</u>	<u>7-3-2018</u>	<u>Trucilla R. Duncan</u>	<u>1109 Village Sq. Dr Ashland 97520</u>
<u>Gwen Speicher</u>	<u>7-6-2018</u>	<u>GWEN SPEICHER</u>	<u>138 N 3RD ST, ASHLAND 97520</u>
<u>Martha FitzGerald</u>	<u>7-6-2018</u>	<u>MARTHA FITZGERALD</u>	<u>114 N. 3RD ST, ASHLAND 97520</u>
<u>Gary R Hansen</u>	<u>7-7-2018</u>	<u>Gary R Hansen</u>	<u>205 Granite Ashland 97520</u>
<u>Judith Newton</u>	<u>7-7-2018</u>	<u>JUDITH NEWTON</u>	<u>205 Granite St. Ashland 97520</u>
<u>Gloria Eckert</u>	<u>7-11-2018</u>	<u>Gloria Eckert</u>	<u>925 B St. ASHLAND 97520</u>
<u>Ronda Barker</u>	<u>7-11-2018</u>	<u>RONDA BARKER</u>	<u>PO Box 1136 Ashland 97520</u>
<u>Diana Morley</u>	<u>7-11-2018</u>	<u>Diana Morley</u>	<u>135 Suncrest Rd. Talent 97540</u>
<u>Carol Carson</u>	<u>7-11-2018</u>	<u>CAROL CARSON</u>	<u>1042 Oak Knoll Dr Ashland OR 97520</u>

Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet once the certification has been signed and dated!

I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

<u>Alfred Willstatter</u>	<u>7-11-2018</u>	<u>3</u>
Circulator Signature	Date Signed mm/dd/yy	Sheet Number
<u>ALFRED WILLSTATTER</u>	<u>128 CENTRAL AVE ASHLAND OR</u>	Sheet will be numbered by group submitting the petition.
Printed Name of Circulator	Circulator's Address street, city, zip code	

Candidate Signature Sheet | Nonpartisan

Petition ID CC2018-03A

Signatures for this petition are being gathered by PAID Circulators ^{SELF} VOLUNTEER Circulators

This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County JACKSON

Candidate Information	
Name <u>AL WILLSTATTER</u>	Office <u>CITY COUNCILOR</u>
Election <u>GENERAL</u>	District or Position Number <u>3</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

	Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
1	<u>Paul Paul</u>	<u>7/19/2018</u>	<u>(541) 708-0584</u>	<u>969 B STREET, ASHLAND</u>
2	<u>Rebecca Warren</u>	<u>7/19/18</u>	<u>541-880-4299</u>	<u>75 Helman St, Ashland</u>
3	<u>Joice Dyer</u>	<u>7/21/18</u>	<u>773.294.4002</u>	<u>611 Long Way Ashland Or.</u>
4	<u>James Robb Grover</u>	<u>7/30/18</u>	<u>JAMES ROBB GROVER</u>	<u>1526 PINECREST AVE</u>
5	<u>Patricia Chase</u>	<u>7/31/18</u>	<u>Patricia Chase</u>	<u>500 Ann St Ashland OR.</u>
6				
7				
8				
9				
10				

Circulator Certification This certification **must** be completed by the circulator and additional signatures **should not** be collected on this sheet once the certification has been signed and dated!

I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

Alfred Willstatter 7-31-18 4
 Circulator Signature Date Signed mm/dd/yy Sheet Number

ALFRED WILLSTATTER 120 CENTRAL AVE ASHLAND OR
 Printed Name of Circulator Circulator's Address street, city, zip code

Sheet will be numbered by group submitting the petition.

2018